

2015 Dental Plan Rates

100% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Dental Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
State Dental Plan	30.18	25.18	5.00	59.06	29.54	29.52	89.24	54.72	34.52
HealthPartners State of MN Dental Plan	30.38	25.38	5.00	59.54	29.54	30.00	89.92	54.92	35.00

75% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Dental Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
State Dental Plan	30.18	18.90	11.28	59.06	22.16	36.90	89.24	41.06	48.18
HealthPartners State of MN Dental Plan	30.38	19.04	11.34	59.54	22.16	37.38	89.92	41.20	48.72

50% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Dental Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
State Dental Plan	30.18	12.60	17.58	59.06	14.78	44.28	89.24	27.38	61.86
HealthPartners State of MN Dental Plan	30.38	12.70	17.68	59.54	14.78	44.76	89.92	27.48	62.44

0.00% Employer Contribution

Monthly Rates	Employee Coverage			Dependent Coverage			Family Coverage		
Dental Plan	Total	State	Employee	Total	State	Employee	Total	State	Employee
State Dental Plan	30.18	0	30.18	59.06	0	59.06	89.24	0	89.24
HealthPartners State of MN Dental Plan	30.38	0	30.38	59.54	0	59.54	89.92	0	89.92

